Exhibit C



Filing Results

JEFFREY NEGRON MORRISON & FOERSTER LLP 1290 Avenue of the Americas New York, NY 10104 Date: 05/24/2013
Order #: 38271956
Customer #: 504674
Reference 1: 99992/370

Reference 2: --

Target Name: Art Assure Ltd. LLC

Jurisdiction: Secretary of State, Delaware

Filing Type: UCC Financing Statement

Searched Through: --

Results:

See attached filing acknowledgement

Document Listing:

File #	File Date	Type of Filing
20131986943	05/23/2013	Original Financing Statement

NANCY WIFORD Columbus Team 6 4400 Easton Commons Way Suite 125 Columbus, OH 43219 (800) 713-0728 Ext.3546 nancy.wiford@wolterskluwer.com This report contains information compiled from sources which CT Lien Solutions considers reliable, but does not control. Information provided is non-certified unless otherwise indicated. CT Lien Solutions in no way undertakes or assumes any part of the customer's business, legal or similar risks, and does not guarantee the accuracy, completion or timeliness of the information provided, and shall not be liable for any losses or injuries whatever resulting from any contingency beyond its control, or from negligence, regardless of the cause. The categorization of filings is provided for the convenience of the customer and is not to be construed as a legal opinion concerning the status of the filings.

UCC FINANCING					U.C FILEI	C.C. FILING 0 05:20 PM	05/23/2013
A. NAME & PHONE OF					INITIA		2013 1986943
B. SEND ACKNOWL	EDGEMENT TO: (Na	ame and Address)	,			SRV: 1306	40302
Гст	Lien Solutions		-	1			
44	ncy Wiford 00 Easton Com lumbus, Ohio 4	mons Way, Suite 125 13219	-				
				THE ABOVE	SPACE IS FOR	FILING OFFICE US	E ONLY
DEBTOR'S EXACT 19. ORGANIZATION		E - insert only <u>one</u> debtor name (1a	or 1b) - do not abbreviate	or combine names			
OR Art Assure	Ltd. LLC	<u> </u>	FIRST NAME		MIDDLE NAME		SUFFIX
1c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
136 East 74th S	ADD'NL INFO RE	le. TYPE OF ORGANIZATION	New York		NY	10021 1g. ORGANIZATIONA	USA L I.D.#. if any
id. <u>SEE HOTHOVIORO</u>	ORGANIZATION DEBTOR	Limited Liability Company	Delaware			4735257	☐ NONE
ADDITIONAL DEB Za. ORGANIZATION*		LEGAL NAME - insert only on	e debtor name (2a or 2	b) - do not abbreviate or	combine names	·	
OR					MIDDLE NAME		Louisen
26. INDIVIDUAL'S LAST NAME		FIRST NAME				SUFFIX	
2c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'NL INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f, JURISDICTION OF C	DRGANIZATION		2g. ORGANIZATIONA	L t.D.#, if any
		of TOTAL ASSIGNEE of ASSIG	GNOR SIP) - Insert on	y <u>one</u> secured party nam	ıв (3a or 3b)		
OR HNW Fai 3b. INDIVIDUAL'S LA	mily Office, A	ıG	FIRST NAME		MIDOLE NAME		SUFFIX
3c MAILING ADDRESS Seestrasse 77, Postfach CH-8703		crry Zurich		STATE	POSTAL CODE	COUNTRY Switzerland	
Erlenbach 4. This FINANCING STATE	MENT covers the follow	no colfaterai:			<u> </u>		
		to and made apart h	ereof.				
5. ALTERNATIVE DESIG	NATION [if applicable]:	Lessee/lessor Icons	SIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUY	er 🛮 agalien 🖠	NON-UCC FILING
Attach Addendum		for record] (or recorded) in the REA	L ESTATE RECORDS. (if applicable)	7. Check to REQUEST S (ADDITIONAL FEE)	EARCH REPORT(S	6) on Debtor(s) Online Debtors Online Debtors	tor 1 Debtor 2
8. OPTIONAL FILER REFER		Secretary of State		Dal	ntori Art Ac	sure Ltd. LLC	•
		G STATEMENT (FORM UCC1) (RE	EV. 05/22/02)	Dei	JOI. AIL AS	38271956	

38271956

UCC-1 FINANCING STATEMENT

EXHIBIT A

ART ASSURE LTD. LLC (the "Debtor")

and

HNW FAMILY OFFICE, AG (the "Secured Party")

A. This financing statement covers continuing security interest in the following (the "Collateral"), wherever located:

- (a) all of the Debtor's right, title and interest in and to all the works of art identified on Schedule 1 hereto, and any works that may be substituted therefor in accordance with Section 3 to the Security Agreement dated January 18, 2013, made by and between Art Assure Ltd. LLC and HNW Family Office, AG (the "Works");
- (b) all of the Debtor's right, title and interest in and to all proceeds recovered due to a casualty with respect to any Work; and
- (c) all proceeds of any and all of the foregoing Collateral.



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UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]					DELAWARE DEPARTMENT OF STATS U.C.C. FILING SECTION FILED 05:20 PM 05/23/2013 INITIAL FILING # 2013 198694.			
NAME & PHONE OF CO	INTACT AT FILER [OP	lionali				SRV: 13064	16362	
S. SEND ACKNOWLED	GEMENT TO: (Na	me and Address)						
Nand	ien Solutions cy Wiford) Faston Comi	mons Way, Suite 125	7					
	mbus, Ohio 4		ل					
				THE ABOVE	SPACE IS FOR	R FILING OFFICE US	E ONLY	
DEBTOR'S EXACT I	ULL LEGAL NAME	- insert only one debtor name (1a	or 16) - do not abbreviate i	or combine names				
1a. ORGANIZATION'S Art Assure								
16, INDIVIDUAL'S LAS			FIRST NAME		MIDOLE NAME		SUFFIX	
a MAILING ADDRESS 136 East 74 th Street		New York		STATE NY	POSTAL CODE 10021	COUNTRY		
SEE INSTRUCTIONS	ADD'NL INFO RE ORGANIZATION DEBTOR	Limited Liability Company	Delaware	RGANIZATION		1g. ORGANIZATIONA 4735257	L I.D.#, if any	
ADDITIONAL DEBTO		LEGAL NAME - insert only one	g deblor name (2a or 2l	o) - do not abbreviate o	r combine name	s		
26. INDIVIDUAL'S LAS	T NAME		FIRST NAME	AA CITY	MIDDLE NAME		SUFFIX	
c. MAILING ADDRESS			CITY		STATE	POSTAL CODE COUNTRY		
SEE INSTRUCTIONS	ADD'NL INFO RE ORGANIZATION DEBTOR	2e. TYPÉ OF ORGANIZATION	2f. JURISDICTION OF O	RGANIZATION		2g. ORGANIZATIONA	L 1.D.#, if any	
		of TOTAL ASSIGNEE of ASSIG	SNOR SIP) - Insert only	one secured party nar	me (3a or 3b)			
3a. ORGANIZATION'S HNW Fam	NAME IIIy Office, A	.G						
3b. INDIVIDUAL'S LAS	TNAME		FIRST NAME		MIDDLE NAME		SUFFIX	
Seestrasse 77, Postfach CH-8703 Erlenbach		Zurich		STATE	POSTAL CODE	COUNTRY Switzerland		
. This FINANCING STATEM		ng collateral. to and made apart h	ereof.					
		П. постината	NAME OF THE PARTY	DANISEDAN CE	Поставора	IVED DAGRED!	NONLICC EILING	
5. ALTERNATIVE DESIGNA		LESSEE/LESSOR CONS	SIGNEE/CONSIGNOR	BAILEE/BAILOR 7. Check to REQUEST	SELLER/BU		DNON-UCC FILING	

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